STATEMENT OF

FORM 1	ORGANIZATION (See instructions)			Office use only	
1. NAME OF COMMITTEE (in t	(Check if name is changed)	Example: If typying, typover the lines	12FE4M5		
Fleishman-Hill	ard Inc. PAC				
ADDRESS (number and s	200 N. Broadway				
(Check if address is changed)	St. Louis			63102	
		CITY▲	STATE▲	ZIP CODE 📥	
COMMITTEE'S E-MAI (Check if address is changed)	L ADDRESS (Please provide only one				
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
(Check if address is changed)					
2. DATE 0.3					
3. FEC IDENTIFICA	TION NUMBER	C C00200659			
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED	(A)		
I certify that I have exami	ned this Statement and to the best of my k	snowledge and belief it is true, co	rrect and complete	_	
Type or Print Name of	Treasurer Frederic L. Ro	hlfing			
Signature of Treasurer	Electronically Filed by Frederic	c L. Rohlfing	_ Date 03	7 27 7 2009	
NOTE: Submission of fal	se, erroneous, or incomplete information of ANY CHANGE IN INFORM	nay subject the person signing the	·	_	
Office Use Only		For further inform Federal Election C Toll Free 800-424-	ommission -9530	FEC FORM 1 (Revised 02/2009)	